See Reverse Side for Instructions to complete

HAZARDOUS WASTE_GENERATOR'S EXCEPTION REPORT MISSOURI DEPARTMENT OF NATURAL RESOURCES P. O. BOX 176 JEFFERSON CITY, MISSOURI 65102



IMPORTANT - This form shall be completed and filed by the generator with the Department within 45 days of the original shipment date, if LANGUAGE THE STATE OF WITH THE SHART HER THE STATE OF THE SHART HER THE SHART HE SHA 3800 A legible copy of the manifest at issue must account to the generator by the A legible copy of the manifest at issue must account to the generator by the manifest at issue must account to the generator by the manifest at issue must account to the generator by the manifest at issue must account to the generator by the manifest at issue must account to the generator by the manifest at issue must account to the generator by the manifest at issue must account to the generator by the generator

	Original Shipment Date 08 /19 /91 Date Form Completed 10 / 01 / 91
1.	Generator's Name McDonnell Douglas Corporation - ST. Louis Telephone (314) 232-3319 Address Lindbergh & McDonnell Blvds. City St. Louis State MU Zip 63145 U.S. EPA I.D. Number* MODO00818963 Mo. Generator I.D. Number 001001
2.	(1st) Transporter's Name Peoria Disposal Company Address City U.S. EPA I.D. Number* ILD009848193 Mo. Transporter I.D. Number H-1191 (2nd) Transporter's Name Custom Environmental Transport City State Zip City State Zip
3.	Designated Facility Name Rollins Environmental Services (TX) Inc. Telephone (713)930-2300 Address P.O. Box 609, 2027 Battleground Rd. CityDeer Park State TX Zip 77536 U.S. EPA I.D. Number TXD055141378 Mo. Facility I.D. Number* INTX16
4.	Missouri Manifest Document Number 0 0 1 0 0 1 2 2 1 1 Generator I.D. Number
	Out-of-State Document Number 00190416
5.	Waste Identification RCRA RECORDS CENTER
A B C D	Waste Name RQ Hazardous Waste, Solid, N.O.S. Waste Code Quantity Volume** Paint-related Material ORM-E NA9189 F002/F003/F005/D007 11.030 P
6.	Efforts made to trace the whereabouts of the missing hazardous waste or manifests.
ļ	Final copy of manifest was received by McDonnell Douglas on 26 September 1991.
	"I have personally examined and am familiar with the information submitted on this form, and I hereby certify the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including fine and imprisonment."
	Date 1 Oct 9/ Signature Sit Kinship Print Name Bob KARTMAN
	*If Applicable. **See reverse for list of abbreviated codes.

TEXAS WATER COMMISSION
P.O. Box 13087, Capitol Station
Austin, Texas 78711-3087



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form approved. OMB No. 2050-0039, expires 09-30-91

A	UNIFORM HAZARDOUS	1. Generator's US EP	A ID No. M	lanifest	2. Pa				the shaded areas					
7	WASTE MANIFEST	WASTE MANIFEST M. 0 . D . 0 . 0 . 8 . 1 . 8 . 9 . 6 . 3 0 . 2 . 2 . 1							of 1 is not required by Federal law.					
	3. Generator's Name and Mailing Address		A. State Manifest bocament Mamper											
	McDonnell Douglas Corporat		Nº :00190416											
	Lindbergh & McDonnell Blvd 4. Generator's Phone (314 232-3	, MO 63145	B. State Generator's ID 001001/99929											
	5. Transporter 1 Company Name	er	C. State Transporter's ID H-1191/4/297											
	Peoria Disposal Company	. 1. 9. 3	D. Transporter's Phone 309-674-5176											
	7. Transporter 2 Company Name	E. State Transporter's ID 40754												
	HOME CUSTOM ENVIRONMEN	8.58	F. Transporter's Phone 713) 930-450D											
	Designated Facility Name and Site Addr	per	G. State Facility's ID											
П	Rollins Environmental Serv		HW-50089001											
	P.O. Box 609, XX 2027 Bat		H. Facility's Phone											
$\ \ $. 3.7.8												
	11A. 11. US DOT Description (including P						ainers 13. 14. 1							
	HM Number)		No.	Туре	Total Quant	! itv	Unit Wt/Vol	Waste No.						
	a. RQ = 10 lbs. Hazardo	ous Waste, Sol	id, N.O.S.					100	920450					
'	(contains paint-relate	ed material)							1 1					
G	X ORM-E NA9189 (D007/F0	02/F003/F005)	4	0.0.1	C M	1.1.0	30	Р	D007					
N E									A. Wagner					
R A	10-48496422 48964.70	,						, '	h L) 24					
o R	46444				·				H					
	C.													
П														
				<u> </u>	·			<u> </u>						
	d.													
	J. Additional Descriptions for Materials Lis	K. Handling Codes for					or Was	tes Listed Above						
	a. also F002/F003/F005													
			7-07											
П	"If unable to deliver to	15. Special Handling Instructions and Additional Information "If unable to deliver to designated TSD facility, return XXX to generator."												
П	Emorgancy contact: 314-2	Emongones contact. 314-232-2285												
	Ellier gency contact, 514 2	Emergency contact; 314-232-2285												
П	16. GENERATOR'S CERTIFICATION: I hereby													
		classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations												
$\ $	If I am a large quantity generator, I certify tha													
	economically practicable and that I have select future threat to human health and the environ													
	future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
d	/ Printed/Typed Name (3) 1	A Printed/Typed Name () Month Day Ye												
Y	Arnette (Wa	aner	Un tett	- (.	10	agr	41		08 19 7.1					
<u>.</u>	17. Transporter 1 Acknowledgement of Re	ceipt of Materials		1		/			Date					
A N	Printed/Typed Name		Signature	, /3	6	1			Month Day Year					
S	18. Transporter 2 Acknowledgement of Receipt of Materials Date								10.811.99.1					
R									1,3					
Ė	Printed/Typed Name	Significant Mc Plandon						Month Day Year						
									0.812.0191					
	13. Discrepancy moleation space			65 A		- A 3	, 199	31						
19. Discrepancy Indication Space OCT 0 3 19														
A C	The Book of the Bo								ibii					
	20. Facility Owner or Operator: Certificatio	20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in them 19. RESOURIES Date Printed Characteristics of the presource of the present of							0.					
Ţ	RESCTX INC.			2277	MISS	DE INICIO	peso	URCES	Date					
	Printed/Typed Name Printed/Typed Name ALCEN Signature Signature Signature Printed/Typed Name Printe							Month Day Year						
	K, ITULE	/V	US	Ve.					18 22 41					

McDonnell Aircraft Company P.O. Box 516, Saint Louis, MO 63166-0516

Creating

BREAKTHROUGHS

that Make a Difference

MODORMELL DOUGLASS



MO DEPT OF NATURAL RESOURCES WASTE MANAGEMENT PROGRAM PO BOX 176 JEFFERSON CITY MO 65102

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